## PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number 10/5/03G

		CÍ AIMO	AC EU ED	·	·	•				701	100 9/	
	CLAIMS AS FILED - PART I  (Column 1) (Column 2)							SMALL EN	ITITY	. 00	OTHER THAN	
U.E	. NATIONAL	STAGE FEES	(Column	11)		(Column 2)	7.			OR	SMALL	ENTITY
					. 3		-	RATE	FEE	<u> </u>	RATE	FEE
EXAMINATION FEE			SMALL ENT. = \$ 150 Satisfies POT Article \$3(1)-			GE ENT. = \$ 800 ther situations =		BASIC FEE	<u> </u>	OR	BASIC FEE	1110
			. (4) = \$ 50 / U.S. Is ISA = \$	\$ 100		100/\$ 200		EXAM. FEE		Ì	EXAM. FEE	
SEARCH FEE .			ALL other countries = \$ 200 / \$ 400		All o	ther situations = 5 250 / \$ 500		SEARCH FEE		1	SEARCH FEE	
FEE FOR EXTRA SPEC. PGS.			minus 100 =			/ 50 ≐		X \$ 125 =		1	X \$ 250 =	<del> </del>
TOTAL CHARGEABLE CLAIMS			23 mln	*	3		X \$ 25 =		OR	X \$ 50 =	<del> </del>	
INDI	EPENDENT CL	AIMS	2 minus 3 = .			·		X \$ 100 =	1	OR	X \$ 200 =	<del> </del>
		DENT CLAIM PR					+ \$ 180 =		OR	+ \$ 360 =	<u> </u>	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	<del> </del>	OR.	I		
		CI AIMS AS.			-	4.		l				
CLAIMS AS AMENDED - PART (I (Column 1) (Column 2) (Column 3)								SMALL E	· ENTITY	OR	OTHER SMALL	
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE .	ADDI- TIONAL FEE
	Total .	<b>*</b> .	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	122
	Independent	*	Minus	***	•	=		X \$ 100 =	·	OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	<del></del>
•								TOTAL ADDIT. FEE		OR	TOTAL ADDIT.	· ;
	•	(Column 1)			(1)	(0-1				ı	FEE	
	CLAIMS H			HIGHE	GHEST (Colum		mn 3)					<del></del>
X I	·	REMAINING • AFTER AMENDMENT		NUMBI PREVIOL PAID F	JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	k# .		ė		X \$ 25 =		OR	X \$ 50 ≈	
	Independent	• .	Minus	two	•	=		X \$ 100 =		OR	X \$ 200 =	· ·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ľ	+ \$ 180 =		OR	+ \$ 360 =	
							Ļ	TOTAL ADDIT.		L	TOTAL ADDIT.	
• .			FEE [	<u></u>	•••	FEE [						
	46.00	•						•		•	•	
	H Me "Highest Me	ımın 1 is less than the ımber Previously Pal	d For IN THIS SPA	CR le loce	than too	1 aniar MOAH		•				
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
			( viai oi nide)	ALITOTIU 18	u ie nign	est nambét toaug	เก เกอ	appropriate box	in column 1.			